Application Data Sheet

Secrecy Order in Parent Appl.?::

Application Information

Application number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	•
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	BRAF Mutation T1796A in Thyroid Cancers
	-
Attorney Docket Number::	001107.00463
Attorney Docket Number:: Request for Early Publication?::	001107.00463 NO
•	
Request for Early Publication?::	NO
Request for Early Publication?:: Request for Non-Publication?::	NO
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure::	NO NO
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets::	NO NO 2
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?::	NO NO 2
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?:: Latin name::	NO NO 2
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?:: Latin name:: Variety denomination name::	NO NO 2 YES
Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?:: Latin name:: Variety denomination name:: Petition included?::	NO NO 2 YES

NO

Applicant Information

City of mailing address::

Applicant Authority Type:: Inventor Primary Citizenship Country:: **Full Capacity** Status:: Given Name:: David Middle Name:: Sidransky Family Name:: Name Suffix:: City of Residence:: Baltimore State or Province of Residence:: Maryland Country of Residence:: **United States** Street of mailing address:: 3007 Northbrook Road City of mailing address:: Baltimore State or Province of mailing address:: Maryland Country of mailing address:: **United States** Postal or Zip Code of mailing address:: 21209 **Applicant Authority Type:**: Inventor Primary Citizenship Country:: Status:: **Full Capacity** Yoram Given Name:: Middle Name:: Family Name:: Cohen Name Suffix:: City of Residence:: **Baltimore** State or Province of Residence:: Maryland **United States** Country of Residence:: 1650 Orleans Street Street of mailing address::

Baltimore

State or Province of mailing address:: Maryland

Country of mailing address:: United States

Postal or Zip Code of mailing address:: 21231

Applicant Authority Type:: Inventor

Primary Citizenship Country:: United States

Status:: Full Capacity

Given Name:: Ming

Middle Name:: Zhao

Family Name:: Xing

Name Suffix::

City of Residence:: Baltimore

State or Province of Residence:: Maryland

Country of Residence:: United States

Street of mailing address:: 6056 Countless Stars Run

City of mailing address:: Clarksville

State or Province of mailing address:: Maryland

Country of mailing address:: United States

Postal or Zip Code of mailing address:: 21029

Correspondence Information

Correspondence Customer Number:: 22907

Representative Information

Representative Customer Number:: 22907

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non-provisional of	60/462,046	April 14, 2003
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Foreign Prior	rity Information			
Country::	Application number::	Filing Date::	Priority Claimed::	

Application number::	Filing Date::	Priority Claimed::
		-
	Application number::	Application number:: Filing Date::

Assignee Information

Assignee name:: The Johns Hopkins University

Street of mailing address:: 3400 N. Charles Street

City of mailing address:: Baltimore

State or Province of mailing address:: Maryland

Country of mailing address:: United States

Postal or Zip Code of mailing address:: 21218